

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009665

FILED
Mar 15, 2011
Secretary of State

Entity Name: EDUQUILTERS, INC.

Current Principal Place of Business:

96 WILLARD ST STE 304
COCOA, FL 32922

New Principal Place of Business:

Current Mailing Address:

245 HIGHWAY A1A
601
SATELLITE BEACH, FL 32937 US

New Mailing Address:

FEI Number: 20-0384339

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEANS, THOMAS W
47 W NEW HAVEN AVE STE 200
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DP
Name: ENGEL, MARGIE
Address: 245 HWY A1A #601
City-St-Zip: SATELLITE BCH, FL 32937 US

Title: DV
Name: MILNER, SHERYL
Address: 48 C PINEY BRANCH WAY
City-St-Zip: WEST MELBOURNE, FL 32940 US

Title: DT
Name: COSTANZO, LAURA
Address: 10117 EASTERN LAKE AVENUE
City-St-Zip: ORLANDO, FL 32817 US

Title: DS
Name: GAMBLIN, PATTI
Address: 9990 S TROPICAL TRL
City-St-Zip: MERRITT ISLAND, FL 32952 US

Title: DD
Name: GIBBS, CLAIRE
Address: 3449 WILLOW WOOD DRIVE
City-St-Zip: WEST MELBOURNE, FL 32904 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARGIE ENGEL

PRES

03/15/2011

Electronic Signature of Signing Officer or Director

Date